

# **Wisconsin School 2006-2007**



## **Immunization Requirements**

**Immunization Program  
Bureau of Communicable Diseases and Preparedness  
Division of Public Health**

The purpose of this booklet is to provide all the necessary forms and explanation about the Student Immunization Law (Chapter 252, Wis. Stats. and HFS 144 Wis. Admin. Code).

Included is the form to assess compliance (SCHOOL REPORT TO LOCAL HEALTH DEPARTMENT, DPH 4002), to report non-compliant students to the district attorney (SCHOOL REPORT TO THE DISTRICT ATTORNEY, DPH 4212), and to apply sanctions to non-compliant students (LEGAL NOTICE, DPH 4001 and Notice of Exclusion letter). Also included is a facsimile of the STUDENT IMMUNIZATION RECORD (DPH 4020L) and AGE/GRADE REQUIREMENT sheet (PPH 4021) which are to be provided to parents of new students and those requiring vaccines.

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State of Wisconsin

Department of Health and Family Services

DIVISION OF PUBLIC HEALTH

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Date: August 2006

To: -Public and Private School Principals  
-School Nurses

From: Daniel Hopfensperger, Director  
Wisconsin Immunization Program

Subject: Annual Immunization Assessment

Enclosed are the materials you will need for the 2006-2007 school year immunization law assessment. Please take a few minutes to review the enclosed materials and forward them to the appropriate staff so that reporting deadlines can be met. The School Booklet contains all of the materials that you will need to complete this year's assessment. Remember that the form entitled "School Report to Local Health Department", part A and B, must be received by your local health department by the 40<sup>th</sup> school day. Do not mail the form to the Wisconsin Immunization Program in Madison. For your convenience an address list of local health departments has been included in this packet. A blank copy of the school report form as well as other forms found in this booklet can be downloaded from our web site at: <http://dhfs.wisconsin.gov/immunization/index.htm>. When you are on the WI Immunization home page, in the left-hand column, click on the "Requirements" link. "Requirements" is about 2/3 of the way down from the top of the column. After you get to the "Requirements" page, towards the middle of the page, find "Resource/Links" and click on it. This will take you to "Records and Reports" where you will find a number of school forms that you can download and use.

The Wisconsin Immunization Registry (WIR) is also available to assist you in locating immunization records of non-compliant students. If you need additional information or help on the WIR please contact the WIR Helpdesk at 608-266-9691.

Wisconsin schools have relatively high immunization levels, however, we should all be aware that vaccine preventable diseases can still occur. During the 2005-2006 school year, an imported case of measles in a adult traveler who had recently visited Germany could have spread to a high school had it not been for the rapid response of the school and local health department. By excluding a school age contact that was not immunized and subsequently contracted measles further measles disease was averted.

Also during the 2005-06 school year Wisconsin experienced an increase in the number of mumps cases as a result of an outbreak that occurred in the state of Iowa. Because

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of our high levels of vaccinations and the school law requiring two doses of mumps vaccine we did not experience a major outbreak in any Wisconsin school.

Over the past year new vaccines have been licensed and existing vaccine recommendations have changed. However, currently there are no revisions to the administrative rules regarding vaccine requirements. If changes are made, you will be informed well in advance.

Several schools have inquired as to what is the definition of kindergarten vs. pre-kindergarten in relation to the Wisconsin Immunization Law and when would a child be considered "in process". "In process" refers to a child who has started a vaccine series but has not received all required doses. For a student entering a Wisconsin school for the first time, be it pre-kindergarten (K3, K4, early childhood development classes), kindergarten (K5) or a transfer student from out of state at any age, the in process "clock" for that child begins when that child enters school. Please see the first bullet on Immunization Law Clarification section of this booklet for further details.

Immunizations have been proven to be a key tool in preventing a number of serious communicable diseases. The Department of Health and Family Services is committed to ensuring children get their recommended immunizations on time. In doing so we are working with public and private health care providers, schools, community based organizations and others in collaborative efforts to raise awareness to the threat vaccine preventable diseases pose to the health of children and the importance of on schedule immunization. Schools play a huge role in these efforts through your work in enforcing the requirements of the school immunization law. Your work in ensuring that children receive the immunizations they need prevents illness that could otherwise keep kids out of school.

If you have any problems, questions or need assistance, please contact your local health department or nearest Regional Immunization Program Advisor listed below.

Eau Claire  
Jim Zanto  
715-836-2499

Green Bay  
Jean Zastrow  
920-448-5231

Madison  
Debbie Beck  
608-266-0008

Milwaukee  
Jacqueline Kowalski  
414-227-4876

Milwaukee  
Cathy Edwards  
414-227-3995

Rhineland  
Jane Dunbar  
715-365-2709

Thank you for your cooperation.

cc: School Superintendents, DPI School Health Services, Local Health Departments, Regional Office Directors, Nursing Consultants, and Immunization Program Advisors

School Compliance Time Line  
2006-2007 School Year

School Day	Action	Form* to use
1 <sup>st</sup>	Admission to School	
15 <sup>th</sup>	Legal Notice to parents of students with <i>NO RECORD</i> or <i>BEHIND SCHEDULE</i> or <i>IN PROCESS</i> (as needed)	DPH 4001
25 <sup>th</sup>	Legal Notice (+Exclusion letter, if applicable)	DPH 4001
30 <sup>th</sup>	<p><b>First Deadline: Exclusion</b> is mandatory for non-compliant students in grades K through 5<sup>th</sup> in school districts whose previous year's compliance level is &lt;99%. Exclusion is optional for all others.</p> <p>Non-compliant students include:</p> <ul style="list-style-type: none"> <li>A. <i>NO RECORD</i> on file,</li> <li>B. <i>BEHIND SCHEDULE</i> for the 1<sup>st</sup> dose of polio, MMR, DTP/DTaP/DT/Td, Hep B and varicella in all grades.</li> <li>C. <i>BEHIND SCHEDULE</i> for the 3<sup>rd</sup> and/or 4<sup>th</sup> doses of polio and/or DTP/DTaP/DT/Td and the 3<sup>rd</sup> dose of Hep B for all students who were not complete during their previous school year.</li> </ul>	
40 <sup>th</sup>	School report to local health department.	DPH 4002
60 <sup>th</sup>	District Attorney report to local DA of students missing 1 <sup>st</sup> deadline	DPH 4212
80 <sup>th</sup>	Legal notice to parents of non-compliant students for the second deadline	DPH 4001
90 <sup>th</sup>	<p><b>Second Deadline:</b> <i>BEHIND SCHEDULE</i> for 2<sup>nd</sup> doses of polio, MMR, DTP/DTaP/DT/Td, Hep B. Also behind schedule for 2<sup>nd</sup> dose of Varicella for students immunized with 1 doses at <math>\geq 13</math> years.</p>	DPH 4001
100 <sup>th</sup>	District Attorney report to local DA of students missing 2 <sup>nd</sup> deadline	DPH 4212

\*DPH 4001=Legal Notice, DPH 4002=School Report to Local Health Department and  
DPH 4212=School Report to the District Attorney

## Immunization Law Clarification

- **Definition of Kindergarten and Pre-Kindergarten:** The vaccine requirements of the Wisconsin Student Immunization Law are not grade specific for children enrolled in programs lower than 5 year old kindergarten. The law requires specific doses of vaccines for children 2 years through 4 years of age. The vaccine requirements and time line for when they are to be met should begin when the child enters school for the first time. For purposes of determining if a child meets the vaccine specific requirements and filling out the School Report to the Local Health Department, "Kindergarten" refers to children in K5 programs. Children in K4 or lower programs such as Early Childhood and some Headstart programs should meet the age requirements rather than a grade requirement and should be marked in the "Pre-Kindergarten" section of the School Report to the Local Health Department. School districts that have compliance levels below 99% must exclude all non-compliant children in K5 to 6<sup>th</sup> grade. Exclusion of non-compliant children in K4 and lower programs is optional.
- **Day Care vs School:** School assessments measure compliance with the immunization law. Children "enrolled" in early education programs within the school should be reported as part of the school report. If a "licensed" child care center is located in the school they will be assessed separate from the school via a direct mailing from the Department of Health and Family Services.
- **Varicella vaccine: one dose vs. two doses:** All students in grades K-12 with a history of the chickenpox disease are compliant with the varicella requirement. Students without a disease history who are 12 years of age or less require 1 dose of varicella vaccine. Those students 13 years of age and older and who have never received varicella vaccine or had disease require 2 doses. For example, if a child is 13 year of age and already had one dose of vaccine when he or she was 12 years of age, that child does not need a second dose. Two doses of varicella vaccine are only required for students 13 years of age or older who are receiving the vaccine for the first time. A history of chickenpox is not a waiver.
- **Valid doses:** Vaccines in a series are recommended at certain time intervals. However, the Student Immunization Law does not address the issue of spacing of vaccines. Therefore, the number of doses, including those that may be improperly spaced, can be counted toward compliance with the Student Immunization Law. Schools that have access to the Wisconsin Immunization Registry may find a vaccine marked "not valid" which is acceptable under the Student Immunization Law. Not valid doses are usually due to improper spacing of vaccines. The only spacing requirement in the

law is the first dose of MMR vaccine after the 1<sup>st</sup> birthday and a dose of DTaP/DT vaccine after the 4<sup>th</sup> birthday for kindergarten enterers.

- **New vaccines and waivers:** The use of the waiver applies to vaccine(s) required at the time a student enrolls into a Wisconsin school for the first time (e.g. kindergarten or out of state transfer). Any new vaccines required after enrollment would require a separate waiver for that vaccine.
- **Assessment of "off campus" students:** The immunization assessment report of students who are officially enrolled in a school but spend time away from that school should be counted in the school where they are officially enrolled. This would include students in Group Educational Settings, Alternative school, Homebound students and Virtual Schools.
- **4-day grace period:** The Student Immunization Law allows a 4-day grace period for certain required, age dependent, vaccines. These vaccines include the first dose of MMR vaccine after the 1<sup>st</sup> birthday and the dose of DTaP/DT vaccine after the 4<sup>th</sup> birthday for kindergarten enterers. The 4-day grace period also applies if the 3<sup>rd</sup> dose of polio is administered after the 4<sup>th</sup> birthday (a dose 4 days or less before the 4<sup>th</sup> birthday is acceptable) no further doses are required. The 4-day grace period means a student is compliant with the immunization law if the dose of each of these vaccines was received 4 days or less before the date it was required.
- **Home schooled children:** The Student Immunization Law does not cover home- schooled children unless they enroll in any class or grade in a Wisconsin public or private school. If the child is enrolled for the first time he or she should be handled like any other first time enrollee and allowed to be "in process" if all vaccines have not already been administered. If that child leaves the Wisconsin school and later re-enrolls, that child would be considered "behind schedule" if all vaccines have not already been administered.
- **Legal Notice and Notice of Exclusion forms:** Parents of children who are "behind schedule" or have "no record" on file should receive the Legal Notice by the 15<sup>th</sup> and 25<sup>th</sup> school day from the first day of admission to school. For children "in process" the legal notice should be sent as needed. The first notice should include the 30<sup>th</sup> school day deadline date inserted in the first paragraph in the space provided. The signature line should be completed with the "date sent" filled in. A blank Student Immunization Record should be attached so the parent can return the required information. The second notice, if needed, should include the same information as the first with a new "date sent" filled in on the signature line. In addition, the Notice of Exclusion should be attached if your school chooses to exclude the child or if your elementary school is required to exclude because the compliance level of your school district is less than 99%. The exclusion date would be the 31<sup>st</sup>



school day from the beginning of admission to school and that date should be inserted on Notice of Exclusion.

- **Pre Kindergarten:** Children listed in the age group 2 years through 4 years on the Age/Grade Requirement sheet are considered pre kindergartners. They are not subject to mandatory exclusion under chapter 252.
- **Hepatitis B: 2 dose series:** An exception was made in HFS 144 for students who received 2 doses of a licensed 2-dose formulation. These students are not required to receive a third dose. The 2 dose hepatitis B vaccine is licensed only for children 11-15 years of age and is given 4-6 months apart. If the first dose was received by the 30th school day, the second would be required by the 30th school day of the following school year. The vaccine manufacturer indicates that most health care providers are using the 3 dose formulation.
- **DTP/DTaP/DT vaccine after 4 years of age:** The HFS 144 requirement that at least one dose of DTP/DTaP/DT is to be received after the 4th birthday applies to kindergarten children only. The purpose of this required (and recommended) dose is to boost the level of protection primarily against pertussis (whooping cough).

- **Glossary of Vaccine Names**

DT	Diphtheria and Tetanus vaccine (pediatric type)
Td	Tetanus and diphtheria vaccine (For persons ages 7 years or older)
Tdap	Tetanus, diphtheria and acellular Pertussis vaccine (adolescents)
DTaP	Diphtheria, Tetanus and acellular Pertussis vaccine
DTP	Diphtheria, Tetanus and Pertussis vaccine (no longer available)
Hep B	Hepatitis B vaccine
MMR	Measles, Mumps and Rubella vaccine
Var	Varicella (chickenpox vaccine)

- **Vaccine Trade Names:** A health care provider may administer a required vaccine and only provide the parent with a note listing a vaccine trade name rather than spelling out the specific type of vaccine received. The following list of commonly used vaccines and their manufacturer's trade names is provided to help you "translate" should this happen.

<u>Vaccine Type</u>	<u>Trade Name</u>
DTaP	Tripedia®
DTaP	Infanrix®
DTaP	DAPTACEL®
DTaP	ACEL-IMMUNE® (no longer available)
DTaP	Certiva® (no longer available)
DTaP-Hib combination	TriHIBit® (Licensed for 4 <sup>th</sup> dose only)
DTaP-Hep B-IPV combination	Pediarix®
DTP-Hib combination	Tetramune® (no longer available)

Hepatitis B-Hib combination	Comvax®
Hepatitis B	ENGRIX B®
Hepatitis B	RECOMBIVAX®
Inactivated Polio Vaccine (IPV)	IPOL®
Tdap	Boostrix® or Adecell®
Varicella (chickenpox)	Varivax®

- **Immunization Law Definitions**

A. Meets Minimum: Means the student has a record containing the dates (month/day/year) of immunizations for every dose of vaccine required for his/her grade level. For students in "ungraded" programs, use the requirement for the traditional age-appropriate grade.

B. In Process: Applies to a student enrolling for the first time in a Wisconsin school (e.g. pre-Kindergarten or kindergarten, out-of-state transfers and home schooled children) and to existing students for which a new vaccine is first required. To be considered "In Process", the student must provide the immunization dates demonstrating receipt of the first doses of required vaccines within 30 school days of admission. Prior to the 30<sup>th</sup> school day the legal notice should be sent as needed. "In Process" also applies to the second doses within 90 school days of admission and the third (and fourth doses, if required) within 30 school days of admission the following school year. Any student who fails to meet the deadlines is then "behind schedule".

C. Behind Schedule: Applies to students who do not have a record that includes complete dates for the first, second or final deadlines. Because the Wisconsin Immunization Law applies to all public and private schools, a transfer student from any school within the state who is "Behind Schedule" enters the new school as "Behind Schedule", not "In Process".

D. No Record: Applies to students who do not have a student immunization record on file and any transfer student for whom a record has not yet been received from the previous school. It also applies to students who have submitted a record with inappropriate information such as "all vaccines received", "child up to date" or "record at doctor's office".

E. Waiver: Waivers are available for personal conviction, religious or medical/health reasons. Children for whom waivers are filed are compliant. However, they may be subject to exclusion from school in the event of an outbreak of diseases for which they are not completely immunized. A history of chickenpox is not a waiver. If a waiver is selected, all vaccines the child has already received should be listed on the Student Immunization Record by the parent or guardian.

# DEPARTMENT OF HEALTH AND FAMILY SERVICES

Division of Public Health  
DPH 4001 (Rev. 07/06)

STATE OF WISCONSIN

s. 252.04, Wis. Stats

## LEGAL NOTICE

### Required Immunizations (shots) for Admission to Wisconsin Schools

To the Parent, Guardian or Legal Custodian of \_\_\_\_\_ Grade \_\_\_\_\_

The Student Immunization Law requires that all students through grade 12 meet a minimum number of required immunizations prior to school entrance. These requirements can be waived only for health, religious or personal conviction reasons. According to our records, your child is not compliant because either an immunization record is not available at school or an immunization(s) is needed (see reason for noncompliance marked below). To remain compliant with the law, please provide the month, day and year that your child received the required immunization(s) on the attached Student Immunization Record or select one of the waiver options prior to \_\_\_\_\_ and return the form to your child's school. Failure to do so may result in a fine of up to \$25 per day or possible exclusion from school. If you have any questions about this notice, please contact your child's school.

In past years, thousands of Wisconsin children caught diseases such as measles, pertussis (whooping cough) and rubella, and many were left with severe disabilities. The Student Immunization Law was passed in order to keep these and other vaccine-preventable diseases from returning and harming the health of our children.

#### Reason for noncompliance:

☐ No Record

Your child needs the following checked vaccines:

<u>DTP/DTaP/DT/Td</u>	<u>Polio</u>	<u>MMR</u>	<u>Hepatitis B</u>	<u>Varicella*</u>
<input type="checkbox"/> 1 <sup>st</sup> Dose	<input type="checkbox"/> 1 <sup>st</sup> Dose	<input type="checkbox"/> 1 <sup>st</sup> Dose	<input type="checkbox"/> 1 <sup>st</sup> Dose	<input type="checkbox"/> 1 <sup>st</sup> Dose
<input type="checkbox"/> 2 <sup>nd</sup> Dose	<input type="checkbox"/> 2 <sup>nd</sup> Dose	<input type="checkbox"/> 2 <sup>nd</sup> Dose	<input type="checkbox"/> 2 <sup>nd</sup> Dose	<input type="checkbox"/> 2 <sup>nd</sup> Dose
<input type="checkbox"/> 3 <sup>rd</sup> Dose	<input type="checkbox"/> 3 <sup>rd</sup> Dose		<input type="checkbox"/> 3 <sup>rd</sup> Dose	
<input type="checkbox"/> 4 <sup>th</sup> Dose	<input type="checkbox"/> 4 <sup>th</sup> Dose			
<input type="checkbox"/> 5 <sup>th</sup> Dose				

\* If your child already had chickenpox disease, varicella vaccine is not required. Check "yes" to the chickenpox disease question on the attached Student Immunization Record and enter the date of disease if known. The second dose of varicella vaccine is only required if the first dose was given when the child was 13 years of age or older. Your immediate cooperation is appreciated.

School

Phone

School Official (Title)

Date sent

enc: Student Immunization Record

## **SAMPLE**

### **Notice of Exclusion**

**Dear Parent:**

**The attached Legal Notice indicates that your child is currently not in compliance with the Student Immunization Law and therefore will be excluded from this school on \_\_\_\_\_(date). For your child to re-enter school, you must do one of the following:**

**(1) Provide this school with the date (month, day and year) of the required immunization(s) either from your records or from a current immunization your child received from your doctor or health department. For varicella (chickenpox), an indication of disease is also acceptable.**

**(2) Claim a waiver**

**Use the attached Student Immunization Record to provide the date of immunization(s), claim a waiver or indicate varicella disease.**

**The Immunization Law in Wisconsin was passed to protect all children from vaccine-preventable diseases. The Law requires public elementary schools in school districts below a 99% compliance level to exclude noncompliant students in grades kindergarten through five. A non-compliant student is one who is "behind schedule" for a required immunization (s) or has no immunization record on file at school.**

**Thank you for your cooperation.**

## STUDENT IMMUNIZATION RECORD

**INSTRUCTIONS TO PARENT:** COMPLETE AND RETURN TO SCHOOL WITHIN 30 DAYS AFTER ADMISSION. State law requires all public and private school students to present written evidence of immunization against certain diseases **within 30 school days of admission**. The current age/grade specific requirements are available from schools and local health departments. These requirements can be waived only if a properly signed health, religious, or personal conviction waiver is filed with the school (see "WAIVERS" on reverse side). The purpose of this form is to measure compliance with the law and will be used for that reason only. If you have questions on immunizations or how to complete this form, contact your child's school or local health department.

### PERSONAL DATA

### PLEASE PRINT

Step 1	Student's Name	Birthdate (Mo/Day/Yr)	Gender	School	Grade	School Year
	Name of Parent/Guardian/Legal Custodian	Address (Street, City, State, Zip)			Telephone Number ( )	

### IMMUNIZATION HISTORY

Step 2	List the MONTH, DAY AND YEAR your child received each of the following immunizations. DO NOT USE A (✓) OR (X) except to answer the question about chickenpox. If you do not have an immunization record for this student at home, contact your doctor or public health department to obtain it.					
	TYPE OF VACCINE*	FIRST DOSE Mo/Day/Yr	SECOND DOSE Mo/Day/Yr	THIRD DOSE Mo/Day/Yr	FOURTH DOSE Mo/Day/Yr	FIFTH DOSE Mo/Day/Yr
	DTaP/DTP/DT/Td/Tdap (Diphtheria, Tetanus, Pertussis)					
	Polio					
	Hepatitis B	3 dose pediatric formulation				*Hib vaccine is only required for children in licensed day care centers. Do <u>not</u> report the dates your child received Hib vaccine on this form.
		2 dose adolescent formulation				
	MMR (Measles, Mumps, Rubella)					
	Varicella (Chickenpox) Vaccine	Vaccine is required only if your child has not had chickenpox disease. See below:				
	Has your child had Varicella (chickenpox) disease? Check the appropriate box					
	And provide the year if known:					
	<input type="checkbox"/> YES _____ year (Vaccine not required)					
	<input type="checkbox"/> NO or Unsure (Vaccine required)					

### REQUIREMENTS

Step 3	Refer to the age/grade level requirements for the current school year to determine if this student meets the requirements.
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### COMPLIANCE DATA

Step 4	<p><b>STUDENT MEETS ALL REQUIREMENTS</b> Sign at Step 5 and return this form to school.</p> <p>_____ or _____</p> <p><b>STUDENT DOES NOT MEET ALL REQUIREMENTS</b></p> <p>Check the appropriate box below, sign at Step 5, and return this form to school. PLEASE NOTE THAT INCOMPLETELY IMMUNIZED STUDENTS MAY BE EXCLUDED FROM SCHOOL IF AN OUTBREAK OF ONE OF THESE DISEASES OCCURS.</p> <p><input type="checkbox"/> Although my child has NOT received ALL required doses of vaccine, the FIRST DOSE(S) has/have been received. I understand that the SECOND DOSE(S) must be received by the 90th school day after admission to school this year, and that the THIRD DOSE(S) and FOURTH DOSE(S) if required must be received by the 30th school day next year. I also understand that it is my responsibility to notify the school in writing each time my child receives a dose of required vaccine.</p> <p><b>NOTE:</b> Failure to stay on schedule and notify the school may result in court action and a fine of up to \$25.00 per day of violation.</p> <p><b>WAIVERS</b> (List in Step 2 above, the date(s) of any immunizations your child has already received)</p> <p><input type="checkbox"/> For health reasons this student should not receive the following immunizations _____</p> <p>_____ SIGNATURE - Physician Date Signed _____</p> <p><input type="checkbox"/> For religious reasons this student should not be immunized.</p> <p><input type="checkbox"/> For personal conviction reasons this student should not be immunized.</p>
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### SIGNATURE

Step 5	This form is complete and accurate to the best of my knowledge.	
	_____ SIGNATURE - Parent/Guardian/Legal Custodian or Adult Student	_____ Date Signed

### STUDENT IMMUNIZATION LAW AGE/GRADE REQUIREMENTS 2006-2007 SCHOOL YEAR

The following are the minimum required immunizations for each age/grade level. It is not a recommended immunization schedule for infants and preschoolers. For that schedule, contact your doctor or local health department.

Age/Grade	Number of Doses					
Pre K (2 years through 4 years)	4 DTP/DTaP/DT	3 Polio	1 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5</sup>	
Grades K <sup>2</sup> through 12	4 DTP/DTaP/DT/Td <sup>3</sup>	4 Polio <sup>4</sup>	2 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5, 6</sup>	

1. MMR: The first dose of MMR vaccine must have been received on or after the first birthday (Note: a dose 4 days or less before the 1<sup>st</sup> birthday is also acceptable).
2. DTaP/DT vaccine for children entering Kindergarten: Your child must have received one dose after the 4<sup>th</sup> birthday (either the 3<sup>rd</sup>, 4<sup>th</sup>, or 5<sup>th</sup>) to be compliant. (Note: a dose 4 days or less before the 4th birthday is also acceptable).
3. DTP/DTaP/DT/Td vaccine for students entering grades 1 through 12: Four doses are required. However, if your child received the 3<sup>rd</sup> dose after the 4<sup>th</sup> birthday, further doses are not required. (Note: a dose 4 days or less before the 4th birthday is also acceptable). A dose of Tdap vaccine is not required but is acceptable to meet this requirement.
4. Polio vaccine for students entering grades kindergarten through 12: Four doses are required. However, if your child received the 3<sup>rd</sup> dose after the 4<sup>th</sup> birthday, further doses are not required. (Note: a dose 4 days or less before the 4th birthday is also acceptable).
5. Var means Varicella (chickenpox) vaccine. Chickenpox disease history is also acceptable.
6. Students 13 years of age or older without a prior history of chickenpox disease or a prior history of varicella vaccine before 13 years of age require 2 doses of varicella vaccine.

### STUDENT IMMUNIZATION LAW AGE/GRADE REQUIREMENTS 2007-2008 SCHOOL YEAR

The following are the minimum required immunizations for each age/grade level. It is not a recommended immunization schedule for infants and preschoolers. For that schedule, contact your doctor or local health department.

Age/Grade	Number of Doses					
Pre K (2 years through 4 years)	4 DTP/DTaP/DT	3 Polio	1 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5</sup>	
Grades K <sup>2</sup> through 12	4 DTP/DTaP/DT/Td <sup>3</sup>	4 Polio <sup>4</sup>	2 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5, 6</sup>	

1. MMR: The first dose of MMR vaccine must have been received on or after the first birthday (Note: a dose 4 days or less before the 1<sup>st</sup> birthday is also acceptable).
2. DTP/DTaP/DT vaccine for children entering Kindergarten: Your child must have received one dose after the 4<sup>th</sup> birthday (either the 3<sup>rd</sup>, 4<sup>th</sup>, or 5<sup>th</sup>) to be compliant. (Note: a dose 4 days or less before the 4th birthday is also acceptable).
3. DTP/DTaP/DT/Td vaccine for students entering grades 1 through 12: Four doses are required. However, if your child received the 3<sup>rd</sup> dose after the 4<sup>th</sup> birthday, further doses are not required. (Note: a dose 4 days or less before the 4th birthday is also acceptable). A dose of Tdap vaccine is not required but is acceptable to meet this requirement.
4. Polio vaccine for students entering grades kindergarten through 12: Four doses are required. However, if your child received the 3<sup>rd</sup> dose after the 4<sup>th</sup> birthday, further doses are not required. (Note: a dose 4 days or less before the 4th birthday is also acceptable).
5. Var means Varicella (chickenpox) vaccine. Chickenpox disease history is also acceptable.
6. Students 13 years of age or older without a prior history of chickenpox disease or a prior history of varicella vaccine before 13 years of age require 2 doses of varicella vaccine.

## SCHOOL REPORT TO LOCAL HEALTH DEPARTMENT

Wisconsin State Statute 252.04 requires that all students through grade 12 who do not submit waivers must present evidence of having received at least the first dose of each vaccine required for their grade within 30 school days of admission and the second dose of DTP/DTaP/DT/Td, Polio, MMR and Hepatitis B vaccines within 90 school days of admission. Evidence of the third and fourth doses (if required for their grade) of DTP/DTaP/DT/Td, Polio and the third dose of Hepatitis B vaccines must be submitted within 30 school days of the beginning of the next school year. Schools must report to the local health department the compliance by students each year by the 40<sup>th</sup> school day.

Telephone	I.D. Number for Address Label	School District
Principal		Person Completing Form
Name of School (as listed on label)		
Address		
City/Town	Zip	County

COMPLETE BOTH PARTS A AND PART B (Part B is on reverse)

### PART A

**INSTRUCTIONS:** Indicate how many students fall into each category (1 through 7) in the grade groupings below. The sum of these categories (row 8) must equal the enrollment for the grade(s) in that column. List students in rows 2 through 7 in Part B. Mail to your local city or county health department, not the Wisconsin Department of Health and Family Services. Do not delay completion of this report, submit promptly.

	List Number of Students	Pre-Kindergarten	Kindergarten	Grades 1-12	TOTAL
(1)	Who meet all minimum requirements				
(2)	<i>In Process</i> (first dose within 30 school days and second dose within 90 school days)				
(3)*	<i>Behind Schedule</i> (missed deadline for first, second, or final doses of vaccine)				
(4)*	With <i>no record</i> on file				
(5)	With <i>health waiver</i>				
(6)	With <i>religious waiver</i>				
(7)	With <i>personal conviction waiver</i>				
(8)**	TOTAL (must = enrollment for grades included in the column)				

\*Names of these students are to be reported to the district attorney and/or may be excluded.

\*\*Total Row 8 = Total of Last Column = Enrollment of School

Instructions: List all students from Part A, rows 2 through 7 in ascending grade order, include date of birth, grade level, and vaccine(s) received to date. Enter "0" if no vaccine was received. Use extra sheets if necessary.

- For student(s) **BEHIND SCHEDULE** or **NO RECORD** (Part A, rows 3 & 4) enter date student(s) will be reported to the District Attorney.
- For student(s) **IN PROCESS** or **WAIVERS** (Part A, rows 2,5,6 & 7) check appropriate box, **I**=In Process, **H**=Health Reasons, **R**=Religious Reasons, and **PC**= Personal Conviction.  
Note: If a separate list of students who are **IN PROCESS** of receiving only Varicella vaccine is maintained it is not necessary to list on Part B. Under Varicella indicate total doses received or "D" for disease.
- For MMR, if first dose was received before the student's first birthday, do not count the dose. Do not include a history of disease, only the vaccine.

[illegible]



**School:** Send report to district attorney of county in which school is located, not to the Department of Health & Family Services.

District Attorney: The following students are not in compliance with the Student Immunization Law 252.04. As required under this Law, we are notifying your office so legal action may be taken.

Date	Telephone	School District
Name of School		
Principal	Person Completing Form	
Address		
City/Town	Zip	

[illegible]

**Sample**

**Spring Kindergarten "Round-up" Letter**

**Dear Parent:**

**Before your child enters kindergarten this Fall, please be aware that the Wisconsin Immunization Law requires Varicella (chickenpox) vaccine or the date your child previously had the disease. Although thought by some to be a harmless disease, Varicella can result in serious complications including bacterial skin infections, Reye Syndrome (a neurologic disorder), encephalitis, and meningitis and can be fatal.**

**Also, please be aware that one dose of DTaP vaccine is required after the 4th birthday. For children who are "up to date" with their preschool DTaP series this will be final (5th) dose that is recommended to ensure prolonged protection, primarily against pertussis also known as whooping cough. For children who are not "up to date" this dose may be the 3rd or 4th in the series and no further doses are required. Because of a 4-day grace period, DTaP vaccine received 4 days or less before the 4<sup>th</sup> birthday is also acceptable.**

**The date (month, day, and year) of each immunization must be entered on the Student Immunization Record that is available from your child's school and should be submitted to the school your child will attend.**

**Waivers are available for religious, health, and personal conviction reasons. However, in the event of an outbreak of a vaccine preventable disease, students with waivers may be excluded from school until the outbreak subsides.**

**You are encouraged to have your child immunized well in advance of school opening to avoid the late summer rush at immunization clinics. For immunizations, contact your doctor, clinic, HMO or nearest public health department.**

**You may view your child's immunization record from your computer on the Wisconsin Immunization Registry (WIR). The WIR is a secure computerized data system that tracks immunizations given to people. The internet address is <http://dhfsWIR.org>. To obtain the dates of your child's immunizations, type in your child's name, social security or Medicaid number. In order to access your child's record their social security number must be in the system. If it is not, contact your medical provider and ask that the number be put into the WIR so that you can access your child's immunization record. Address information about your child is not provided.**

**If you would like further information on immunization, please see the following websites: [www.cdc.gov/nip](http://www.cdc.gov/nip) , [www.immunize.org](http://www.immunize.org) , and [www.immunizationinfo.org](http://www.immunizationinfo.org).**

**Thank you.**

<b>DEPARTMENT NAME</b>	<b>ADDRESS</b>	<b>P O BOX</b>	<b>CITY</b>
Adams County Public Health Department	108 E. North St.		Friendship
Appleton City Health Department	100 North Appleton Street		Appleton
Ashland County Health Department	301 Ellis Avenue		Ashland
Barron County Health Department	410 E. LaSalle Avenue		Barron
Bayfield County Health Department	117 E. Fifth St.		Washburn
Brown County Health Department	610 S. Broadway St.		Green Bay
Buffalo County Hlth & Human Serv Department	407 S. Second St.		Alma
Burnett County Health Department	7410 County Road K, #280		Siren
Caledonia/Mt. Pleasant Health Department	10005 Northwestern Ave., Suite A		Franksville
Calumet County Health Department	206 Court Street		Chilton
Chippewa County Dept of Public Health	711 North Bridge St., Rm 222		Chippewa Falls
Clark County Health Department	517 Court St., Rm 105		Neillsville
Columbia County Health Department	2652 Murphy Rd.		Portage
Crawford County Health Department	225 N. Beaumont Rd., Suite 306		Prairie du Chien
Cudahy Health Department	5050 South Lake Drive		Cudahy
Dane County Human Services Department	1202 Northport Drive		Madison
DePere Department of Public Health	335 S. Broadway		DePere
Dodge County Health Department	143 East Center Street		Juneau
Door County Health Department	421 Nebraska Street		Sturgeon Bay
Douglas County Health Department	1316 N. 14 <sup>th</sup> St., Suite 324		Superior
Dunn County Health Department	800 Wilson Avenue		Menomonie
Eau Claire City/County Health Department	720 Second Avenue		Eau Claire
Florence County Health Department	501 Lake Avenue	P O Box 17	Florence
Fond du Lac County Health Department	160 South Macy Street, 3 <sup>rd</sup> Floor		Fond du Lac
Forest County Health Department	200 E. Madison Street		Crandon
Franklin Health Department	9229 West Loomis Road		Franklin
Grant County Health Department	111 S. Jefferson		Lancaster
Green County Health Department	N3150 Highway 81		Monroe
Green Lake County Dept of Hlth & Human Srvc	500 Lake Steel Street	P O Box 588	Green Lake
Greendale Health Department	5650 Parking Street		Greendale
Greenfield Health Department	7325 West Forest Home Avenue		Greenfield
Hales Corners Health Department	5635 South New Berlin Road		Hales Corners
Iowa County Health Department	1205 North Bequette St., Suite 1		Dodgeville
Iron County Health Department	502 Copper Street		Hurley
Jackson County Hlth & Human Services	420 Hwy 54 West		Black River Falls
Jefferson County Health Department	N3995 Annex Road		Jefferson
Juneau County Health Department	220 East State St., Rm 104		Mauston
Kenosha County Division of Health	8600 Sheridan Rd., Suite 600		Kenosha
Kewaunee County Health Department	510 Kilbourn Street		Kewaunee
LaCrosse County Health Department	300 North Fourth Street		LaCrosse
Lafayette County Health Department	729 Clay Street		Darlington
Langlade County Health Department	1225 Langlade Road		Antigo
Lincoln County Health Department	607 North Sales Street		Merrill
Madison Department of Public Health	210 Martin Luther King Jr. Blvd		Madison
Manitowoc County Health Department	823 Washington Street		Manitowoc
Marathon County Health Department	1200 Lake View Drive, Rm 200		Wausau

<b>DEPARTMENT NAME</b>	<b>ADDRESS</b>	<b>P O BOX</b>	<b>CITY</b>
Marinette County Health Department	2500 Hall Avenue, Suite C		Marinette
Marquette County Health Department	480 Underwood Avenue	P O Box 181	Montello
Menasha City Health Department	226 Main Street		Menasha
Menominee County Human Services	P O Box 280		Keshena
Milwaukee City Health Department	841 North Broadway, 3 <sup>rd</sup> Floor		Milwaukee
Monroe County Health Department	14301 County Hwy B., Suite 18		Sparta
Neenah Department of Public Health	211 Walnut Street	P O Box 426	Neenah
North Shore Health Department	4800 West Green Brook Drive		Brown Deer
Oak Creek Health Department	8640 South Howell Avenue		Oak Creek
Oconto County Health Department	501 Park Avenue		Oconto
Oneida County Health Department	Oneida County Courthouse	P O Box 400	Rhineland
Oshkosh Health Department	215 Church Street	P O Box 1130	Oshkosh
Outagamie County Public Health Division	401 South Elm Street		Appleton
Ozaukee County Public Health Department	121 West Main Street		Port Washington
Pepin County Health Department	740 Seventh Avenue West		Durand
Pierce County Health Department	412 West Kinne		Ellsworth
Polk County Health Department	100 Polk County Plaza, Suite 180		Balsam Lake
Portage County Health & Human Services	817 Whiting Avenue		Stevens Point
Price County Health Department	104 S. Eyder, Ground Floor		Phillips
Racine City Health Department	730 Washington Avenue		Racine
Richland County Health Department	221 West Seminary Street		Richland Center
Rock County Public Health Department	3328 North US Highway 51	P O Box 1143	Janesville
Rock County Health Department South	61 Beloit Mall		Beloit
Rusk County Health Department	311 Miner Avenue East, Suite C220		Ladysmith
St. Croix County Dept of Hlth & Human Services	1445 North Fourth Street		New Richmond
St. Francis Health Department	4235 South Nicholson Avenue		St. Francis
Sauk County Public Health Department	West Square Bldg., 505 Broadway		Baraboo
Sawyer County Dept. of Hlth & Human Services	105 East Fourth Street		Hayward
Shawano County Health Department	311 North Main Street		Shawano
Sheboygan County Human Services	1011 North Eighth Street		Sheboygan
Shorewood Health Department	3930 North Murray Avenue		Shorewood
South Milwaukee Health Department	2424 15 <sup>th</sup> Avenue		South Milwaukee

<b>DEPARTMENT NAME</b>	<b>ADDRESS</b>	<b>P O BOX</b>	<b>CITY</b>
Taylor County Health Department	Courthouse G-50, 224 S. Second St		Medford
Trempealeau County Health Department	36245 Main Street		Whitehall
Vernon County Health Department	E7410 County Hwy BB		Viroqua
Vilas County Health Department	330 Court Street-Courthouse		Eagle River
Walworth County Health Department	W4051 Hwy NN		Elkhorn
Washburn County Health Department	222 Oak Street		Spooner
Washington County Health Department	333 East Washington St., Suite 110		West Bend
Watertown Department of Public Health	515 South First Street		Watertown
Waukesha County Health Department	615 West Moreland Blvd		Waukesha
Waupaca County Human Services Division	811 Harding Street		Waupaca
Waushara County Health Department	230 West Park Avenue	P O Box 837	Wautoma
Wauwatosa Health Department	7725 West North Avenue		Wauwatosa
West Allis Health Department	7120 West National Avenue		West Allis
Western Racine County Health Department	156 East State Street		Burlington
Winnebago County Health Department	725 Butler Avenue	P O Box 68	Winnebago
Wood County Health Department	184 Second Street North		Wisconsin Rapids
Wood County-Marshfield Office Annex	630 S. Central Avenue, Suite 303		Marshfield

**Wisconsin Student Immunization Law Compliance Results<sup>1</sup>**  
**Public and Private Schools**  
**Kindergarten (and Pre-K) through 12th Grade**  
**School Year**

	96-97	97-98 <sup>4</sup>	98-99	99-00	00-01	01-02	02-03	03-04 <sup>6</sup>	04-05 <sup>6,7</sup>	05-06 <sup>8</sup> Wis	05-06 <sup>8</sup> MPS <sup>9</sup>	05-06 <sup>8</sup> Wis (minus MPS)
<b>Meet Minimum.</b>	96.3%	92.2%	92.4%	92.5%	92.4%	92.0%	91.5%	94.0%	93.7%	88.5%	44.9%	93.2%
<b>in Process<sup>2</sup></b>	0.8%	4.1%	2.4%	1.9%	1.7%	1.5%	1.5%	1.1%	0.8%	2.2%	16.1%	0.7%
<b>Medical Waiver</b>	0.3%	0.3%	0.3%	0.3%	0.3%	0.3%	0.4%	0.4%	0.3%	0.3%	0.5%	0.3%
<b>Religious Waiver</b>	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.1%	0.2%	0.1%
<b>Personal Convict. Waiver</b>	1.0%	1.2%	1.4%	1.7%	1.9%	2.3%	2.6%	2.8%	3.0%	3.0%	2.0%	3.1%
<b>Behind Schedule<sup>3</sup></b>	0.8%	1.3%	2.6%	2.7%	2.7%	2.8%	2.8%	0.9%	1.6%	4.4%	27.5%	1.9%
<b>No Record</b>	0.6%	0.6%	0.6%	0.7%	0.6%	0.6%	0.7%	0.2%	0.3%	1.1%	8.5%	0.3%

<sup>1</sup> Compliant students include the rows labeled "Meet Minimum", "In Process", "Medical Waiver", "Religious Waiver" and "Personal Conviction Waiver".

Non-compliant students include the rows labeled "Behind Schedule" and "No Record".

<sup>2</sup> "In Process" means the student received the first dose of required vaccines within 30 school days, the second dose within 90 school days, and the third dose (and fourth dose if required) within 30 school days the following school year.

<sup>3</sup> "Behind Schedule" means the student missed the deadline for the first, second, or final doses of vaccine.

<sup>4</sup> Hepatitis B vaccine added as a requirement for kindergarten and 7th grade.

<sup>5</sup> Varicella vaccine added as a requirement for kindergarten.

<sup>6</sup> Provisional data. Milwaukee Public School data not included due to computer system change

<sup>7</sup> Varicella vaccine requirement accelerated to cover grades kindergarten through 8<sup>th</sup>.

<sup>8</sup> Varicella vaccine requirement accelerated to cover grades kindergarten through 12<sup>th</sup>.

<sup>9</sup> MPS means Milwaukee Public Schools

(rev 6/06)

# WISCONSIN STATUTES

## CHAPTER 252

### COMMUNICABLE DISEASES

**252.04 Immunization program.** (1) The department shall carry out a statewide immunization program to eliminate mumps, measles, rubella (German measles), diphtheria, pertussis (whooping cough), poliomyelitis and other diseases that the department specifies by rule, and to protect against tetanus. Any person who immunizes an individual under this section shall maintain records identifying the manufacturer and lot number of the vaccine used, the date of immunization and the name and title of the person who immunized the individual. These records shall be available to the individual or, if the individual is a minor, to his or her parent, guardian or legal custodian upon request.

(2) Any student admitted to any elementary, middle, junior or senior high school or into any day care center or nursery school shall, within 30 school days, present written evidence to the school, day care center or nursery school of having completed the first immunization for each vaccine required for the student's grade and being on schedule for the remainder of the basic and recall (booster) immunization series for mumps, measles, rubella (German measles), diphtheria, pertussis (whooping cough), poliomyelitis, tetanus and other diseases that the department specifies by rule or shall present a written waiver under sub. (3).

(3) the immunization requirement is waived if the student, if an adult, or the student's parent, guardian or legal custodian submits a written statement to the school, day care center or nursery school objecting to the immunization for reasons of health, religion or personal conviction. At the time any school, day care center or nursery school notifies a student, parent, guardian or legal custodian of the immunization requirements, it shall inform the person in writing of the person's right to a waiver under this subsection.

(4) The student, if an adult, or the student's parent, guardian or legal custodian shall keep the school, day care center or nursery school informed of the student's compliance with the immunization schedule.

(5) (a) By the 15<sup>th</sup> and the 25<sup>th</sup> school day after the student is admitted to a school, day care center or nursery school, the school, day care center or nursery school shall notify in writing any adult student or the parent, guardian or legal custodian of any minor student who has not met the immunization or waiver requirements of this section. The notices shall cite the terms of those requirements and shall state that court action and forfeiture penalty could result due to noncompliance. The notices shall also explain the reasons for the immunization requirements and include information on how and where to obtain the required immunizations.

(b) 1. A school, day care center or nursery school may exclude from the school, day care center or nursery school any student who fails to satisfy the requirements of sub.(2).

2. Beginning on July 1, 1993, if the department determines that few than 98% of the students in a day care center, nursery school or school district who are subject to the requirements of sub. (2) have complied with sub. (2), the day care center or nursery school shall exclude any child who fails to satisfy the requirements of sub. (2) and the school district shall exclude any student enrolled in grades kindergarten to 6 who fails to satisfy the requirements of sub. (2).

3. Beginning on July 1, 1995, if the department determines that fewer than 99% of the students in a day care center, nursery school or school district who are subject to the requirements of sub. (2) have complied with sub. (2), the day care or nursery school shall exclude any student enrolled in grades kindergarten to 6 who fails to satisfy the requirements of sub. (2).

4. No student may be excluded from public school under this paragraph for more than 10 consecutive school days unless, prior to the 11<sup>th</sup> consecutive school day of exclusion, the school board provides the student and the student's parent, guardian or legal custodian with an additional notice, a hearing and the opportunity to appeal the exclusion, as provided under s. 120.13(1)(c) 3.

(6) The school, day care center or nursery school shall notify the district attorney of the county in which the student resides of any minor student who fails to present written evidence of completed immunizations or a written waiver under sub. (3) within 60 school days after being admitted to the school, day care or nursery school. The district attorney shall petition the court exercising jurisdiction under ch. 48 for an order directing that the student be in compliance with the requirements of this section. If the court grants the petition, the court may specify the date by which a written waiver shall be submitted under sub. (3) or may specify the terms of the immunization schedule. The court may require an adult student or the parent, guardian or legal custodian of a minor student who refuses to submit a written waiver by the specified date or meet the terms of the immunization schedule to forfeit not more than \$25 per day of violation.

(7) If an emergency arises, consisting of a substantial outbreak as determined by the department by rule of one of the diseases specified in sub. (2) at a school or in the municipality in which the school is located, the department may order the school to exclude students who are not immunized until the outbreak subsides.

(8) the department shall provide the vaccines without charge, if federal or state funds are available for the vaccines, upon request of a school district or a local health department. The department shall provide the necessary professional consultant services to carry out an immunization program, under the requirements of sub. (9), in the jurisdiction of the requesting local health department. Persons immunized may not be charged for vaccines furnished by the department.

(9) (a) An immunization program under sub. (8) shall be supervised by a physician, selected by the school district or local health department, who shall issue written orders for the administration of immunizations that are in accordance with written protocols issued by the department.

(b) If the physician under par. (a) is not an employee of the county, city, village or school district, receives no compensation for his or her services under par.(a) and acts under par. (a) in accordance with written protocols issued by the department, he or she is a state agent of the department for the purposes of ss.165.25(6), 893.82(3) and 895.46.

(c) the department may disapprove the selection made under par.(a) or may require the removal of a physician selected.

(10) The department shall, by rule, prescribe the mechanisms for implementing and monitoring compliance with this section. The department shall prescribe, by rule, the form that any person immunizing a student shall provide to the student under sub. (1).

(11) Annually, by July, the department shall submit a report to the legislature under s.13.172(3) on the success of the statewide immunization program under this section.

History: 1993 a. 27 ss. 181.470

Published: July 30, 1975

Amended: May 20, 1980, April 26, 1982, May 16, 1988, May 3, 1990, May 1, 1992, April 16, 1996, June, 1997, May, 2001, August, 2003.



Unofficial Text (See Printed Volume). Current through date and Register shown on Title Page.

## Chapter HFS 144

### IMMUNIZATION OF STUDENTS

HFS 144.01	Introduction.
HFS 144.02	Definitions.
HFS 144.03	Minimum immunization requirements.
HFS 144.04	Waiver for health reasons.
HFS 144.05	Waiver for reason of religious or personal conviction.

HFS 144.06	Responsibilities of parents and adult students.
HFS 144.07	Responsibilities of schools and day care centers.
HFS 144.08	Responsibilities of local health departments.
HFS 144.09	Responsibilities of the department.

Note: Chapter H 44 as it existed on June 30, 1981, was repealed and a new chapter HSS 144 was created, effective July 1, 1981. Chapter HSS 144 was renumbered chapter HFS 144 under s. 13.93 (2m) (b) 1., Stats., and corrections made under s. 13.93 (2m) (b) 1., 6. and 7., Stats., Register, June, 1997, No. 498.

**HFS 144.01 Introduction.** (1) **PURPOSE AND AUTHORITY.** The purpose of immunization is to prevent disease and suffering and any permanent disability resulting from the disease. These rules implement s. 252.04, Stats., which as public policy seeks to identify and immunize those students who are still susceptible to measles, mumps, rubella, polio, hepatitis B, varicella, diphtheria, tetanus and pertussis upon admission to an elementary, middle, junior or senior high school or a day care center, or *Haemophilus influenzae b* upon admission to a day care center, in order to prevent transmission of these diseases.

(2) **RELATIONSHIP TO INFANT AND PRESCHOOL IMMUNIZATION SCHEDULES.** The emphasis placed in this chapter on meeting minimum immunization requirements upon entry to Wisconsin schools at any grade level or to a day care center complements efforts by the department to promote early immunization of infants and preschoolers according to accepted immunization schedules. Children immunized according to accepted immunization schedules will exceed the minimum requirements set forth herein for all ages and grades.

History: Cr. Register, June, 1981, No. 306, eff. 7-1-81; am. (1), Register, June, 1988, No. 390, eff. 7-1-88; correction in (1) made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; am. (1), Register, June, 1997, No. 498, eff. 7-1-97; am. (1), Register, May, 2001, No. 545, eff. 6-1-01.

**HFS 144.02 Definitions.** (1) "Day care center" has the meaning prescribed in s. 48.65, Stats., and includes nursery schools that fit that definition.

(2) "Department" means the Wisconsin department of health and family services unless otherwise specified.

(3) "DTP/DTPa/DT/Td" means any combination of diphtheria, tetanus, and pertussis vaccine; diphtheria, tetanus and acellular pertussis vaccine; pediatric type diphtheria and tetanus vaccine; or adult type tetanus and diphtheria vaccine.

(3g) "Hib" means *Haemophilus influenzae* type b vaccine.

(3m) "Hep B" means hepatitis B vaccine.

(3r) "Immunization" means the process of inducing immunity artificially by administering an immunobiologic.

(4) "Local health department" means any agency specified in s. 250.01 (4), Stats.

(4m) "MMR" means measles, mumps and rubella vaccine administered in combination or as separate vaccines.

(5) "Municipality" means any town, village, city or county.

(6) "Parent" means the parent, parents, guardian or legal custodian of any minor student.

(7) "Physician" means an individual possessing the degree of doctor of medicine or doctor of osteopathy or an equivalent degree as determined by the medical examining board under s. 448.05 (2), Stats., and holding a license granted by the medical examining board under s. 448.06, Stats.

(8) "School" means any public or private elementary, middle, junior or senior high school, which provides educational instruction to students in any grade kindergarten through 12, or in an

ungraded educational setting, or to preschool children enrolled in early childhood programs.

(9) "School day" in reference to schools has the meaning prescribed in s. 115.01 (10), Stats. A school day for a day care center is any day that the center is open and caring for children.

(10) "Student" means any individual enrolled in a school or day care center or attending a school or day care center.

(11) "Subsided" in reference to substantial outbreak means passage of 2 incubation periods for the disease causing the outbreak without additional cases unless a shorter period of time is judged adequate by the department.

(12) "Substantial outbreak" means an occurrence of a vaccine-preventable disease covered by s. 252.04, Stats., in a given school, day care center or municipality with an incidence exceeding one of the following:

(a) For substantial outbreaks in a municipality, twice the incidence of that disease in the nation as a whole.

(b) For substantial outbreaks in a school or day care center population, the following absolute limits:

1. Measles, one case.
2. Mumps, 2% of the unvaccinated population.
3. Rubella, one case.
4. Polio, one case.
5. Pertussis, 2 cases in a 30-day period.
6. Diphtheria, one case.
7. *Haemophilus influenzae b*, one case in a day care center population.

(13) "Vaccine provider" means a health care facility, as defined in s. 155.01 (6), Stats., which administers vaccines, or a local health department or a physician's office which administers vaccines.

(13m) "Var" means varicella vaccine. Varicella is commonly known as chickenpox.

(14) "Written evidence of immunization" means a record of at least the month and year that each required dose of vaccine was administered or the results of a laboratory test indicating immunity to the disease. Students who have not previously attended a Wisconsin school and who enter after the 1980-81 school year must provide the month, day and year for each required dose of vaccine.

History: Cr. Register, June, 1981, No. 306, eff. 7-1-81; r. and recr. (12) (b), Register, June, 1988, No. 390, eff. 7-1-88; correction in (12) made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; am. (3), cr. (3g), (3m), (3r), (4m) and (13), r. and recr. (4), (6), (7) and (12), renum. (13) to be (14), Register, June, 1997, No. 498, eff. 7-1-97; cr. (13m), Register, May, 2001, No. 545, eff. 6-1-01.

#### HFS 144.03 Minimum immunization requirements.

(1) **INDIVIDUALS INCLUDED.** The minimum immunization requirements authorized by s. 252.04, Stats., apply to any student admitted to a Wisconsin elementary, middle, junior or senior high school or to a Wisconsin day care center.

(2) **REQUIREMENTS FOR THE 2001-02 SCHOOL YEAR AND FOR SCHOOL YEARS FOLLOWING THE 2001-02 SCHOOL YEAR.** (a) Table 144.03-A as qualified by pars. (b) to (f) lists the number of doses of each required vaccine that each student in the 2001-02 school

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year and following school years shall have received since birth for the age or grade of the student. These comprise the minimum basic and booster immunizations required under s. 252.04 (2), Stats. They do not, however, represent all the recommended immunizations for those individuals who begin immunizations in

infancy and follow currently accepted immunization schedules.

(b) Immunization against measles, mumps and rubella shall have been received on or after the date of the first birthday. A dose received 4 days or less before the first birthday is acceptable.

TABLE 144.03--A  
Required Immunizations for the 2001-02 School Year and  
the Following School Years

Age/Grade	Required Immunizations (Number of Doses)				
5 months through 15 months	2 DTP/DTaP/DT	2 Polio	—	2 Hep B	2 Hib
16 months through 23 months	3 DTP/DTaP/DT	2 Polio	1 MMR	2 Hep B	3 Hib <sup>4</sup>
2 years through 4 years	4 DTP/DTaP/DT	3 Polio	1 MMR	1 Var	3 Hep B
Kindergarten through grade 8	4 DTP/DTaP/DT/Td <sup>1</sup>	4 Polio	2 MMR	1 Var <sup>2</sup>	3 Hep B <sup>3</sup>
Grade 9 through grade 12	4 DTP/DTaP/DT/Td	4 Polio	2 MMR	2 Var <sup>2</sup>	3 Hep B <sup>3</sup>

1. For kindergarten only, at least one dose to be received after 4 years of age unless medically contraindicated. A dose received 4 days or less before the fourth birthday is acceptable.

2. Required on entrance to kindergarten, beginning 2001-02 school year. See sub. (3m) for phase-in of other grades.

3. Required for students in grades kindergarten through 4 and 7 through 11 in the 2001-02 school year. See sub. (3) for phase-in of other grades.

4. At least one dose to be received after 12 months of age unless medically contraindicated. A dose received 4 days or less before the first birthday is acceptable.

(c) Exceptions may be made in requirements for the fourth dose of DTP/DT/DTaP/Td vaccine and the fourth dose of polio vaccine. Students who receive the third dose of either of these vaccines after their fourth birthday are not required to receive a fourth dose of that vaccine. A dose received 4 days or less before the 4th birthday is acceptable.

(d) For students in ungraded schools or students age 5 or older in day care centers, the immunization requirements are those for the grade which would normally correspond to the individual's age. Immunization against measles, mumps and rubella is also required for all students age 19 or older.

(e) Exceptions may be made in requirements for Hib vaccine. Students who began the Hib series at 12 to 14 months are only required to receive 2 doses at least 2 months apart. Students who received one dose of Hib at 15 months of age or after are not required to obtain additional doses. A dose received 4 days or less before 15 months of age is acceptable.

(f) Exceptions may be made in requirements for Var vaccine under any of the following circumstances:

1. Students who have a reliable history of varicella disease are not required to receive Var vaccine. A parent of a minor student or an adult student may indicate a reliable history of varicella by signing a statement that the student has had varicella disease.

2. Students who received one dose of Var vaccine before their 13th birthday are not required to receive a second dose of that vaccine.

(g) Exceptions may be made in requirements for the third dose of Hep B vaccine. Students who receive two doses of a licensed two-dose formulation of Hep B vaccine are not required to receive a third dose of Hep B vaccine.

(3) HEP B VACCINE COVERAGE PHASE-IN. (a) Beginning with the 1997-98 school year, students entering day care centers, kindergarten and 7th grade shall have received Hep B vaccine in addition to the other required vaccines listed in Table 144.03-A as qualified by sub. (2) (b) to (g).

(b) For the 1998-99 school year, the requirements for Hep B vaccine listed in par. (a) that apply to students in grade K and 7 shall apply to students in grades K, 1, 7, and 8; to students in grades K through 2 and 7 through 9 in 1999-2000; to students in grades K through 3 and 7 through 10 in 2000-01; to students in grades K through 4 and 7 through 11 in 2001-02; to students in

grades K through 5 and 7 through 12 in 2002-03; and to students in grades K through 12 in 2003-04 and thereafter.

(3m) VAR VACCINE COVERAGE PHASE-IN. (a) Beginning with the 2001-02 school year, students entering day care centers and kindergarten shall have received Var vaccine in addition to the other required vaccines listed in Table 144.03-A as qualified by sub. (2) (b) to (g).

(b) For the 2002-03 school year, the requirements for Var vaccine listed in par. (a) that apply to students in grade kindergarten shall apply to students in grades kindergarten through 1; to students in grades kindergarten through 2 in 2003-04; to students in grades kindergarten through 8 in 2004-05; and to students in grades kindergarten through 12 in 2005-06 and thereafter.

(4) FIRST DEADLINE. Within 30 school days after having been admitted to a school or day care center, each student who has not filed a waiver form shall submit written evidence of having completed at least the first dose of each vaccine required for that student's age or grade, as outlined in Table HFS 144.03-A.

(5) SECOND DEADLINE. Within 90 school days after having been admitted to a school or day care center, each student who has not filed a waiver form shall submit written evidence of having received the second dose of each vaccine required for that student's age or grade, as outlined in Table HFS 144.03-A.

(6) FINAL DEADLINE. Within 30 school days after having been admitted to a school or day care center for the following school year, each student who has not filed a waiver form shall submit written evidence of having received the third and, if required, the fourth dose of both DTP/DTaP/DT/Td and polio vaccines and the final dose of Hep B in grades required under sub. (3) and, for students in day care centers, the final dose of Hib vaccine, if a dose has not been received at or after 15 months of age.

(7) RECORDS OF VACCINATION. Any person who immunizes a student under s. 252.04, Stats., shall maintain records identifying the manufacturer and lot number of the vaccine used, the date of immunization and the name and title of the person who immunized the student.

(10) RELEASE OF IMMUNIZATION INFORMATION. (a) *Between vaccine providers and schools or day care centers.* Vaccine providers may disclose a student's immunization information, including the student's name, date of birth and gender and the day, month, year and name of vaccine administered, to a school or day



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care center upon written or verbal request from the school or day care center. Written or verbal permission from a student or parent is not required to release this information to a school or day care center.

(b) *Among vaccine providers.* Immunization information, including the student's name, date of birth and gender and the day, month, year and name of vaccine administered, may be provided by one vaccine provider to another without written or verbal permission from the student or the parent.

*History:* Cr. Register, June, 1981, No. 306, eff. 7-1-81; r. and recr. (2) and (3), am. (4) to (6), Register, June, 1988, No. 390, eff. 7-1-88; am. (2) (a) to (d), (3) (a) and (b), r. (2) (a), Register, January, 1989, No. 397, eff. 2-1-89; am. (2) (a), (4) and (5), r. and recr. (3), tables 144.03-A and B, Register, July, 1990, No. 415, eff. 8-1-90; corrections made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; r. and recr. (2) (a), Table 144.03-A and (3), am. (2) (c) and (4) to (7), cr. (2) (e) and (10), r. Table 144.03-B, Register, June, 1997, No. 498, eff. 7-1-97; r. and recr. (2) (a) and Table 144.03-A, cr. (2) (5), (g) and (3m), am. (3) (a) and (6), Register, May, 2001, No. 545, eff. 6-1-01; CR 03-043: am. (2) (b), (c), (e) and Table 144.03-A, Register December 2003 No. 576, eff. 1-1-04.

**HFS 144.04 Waiver for health reasons.** Upon certification by a licensed physician that an immunization required under s. 252.04, Stats., is or may be harmful to the health of a student, the requirements for that immunization shall be waived by the department. Written evidence of any required immunization which the student has previously received shall be submitted to the school or day care center with the waiver form.

*History:* Cr. Register, June, 1981, No. 306, eff. 7-1-81; correction made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476.

**HFS 144.05 Waiver for reason of religious or personal conviction.** Immunization requirements under s. 252.04, Stats., shall be waived by the department upon presentation of a signed statement by the parent of a minor student or by the adult student which declares an objection to immunization on religious or personal conviction grounds. Written evidence of any required immunization which the student has previously received shall be submitted to the school or day care center with the waiver form.

*History:* Cr. Register, June, 1981, No. 306, eff. 7-1-81; correction made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; am. Register, June, 1997, No. 498, eff. 7-1-97.

**HFS 144.06 Responsibilities of parents and adult students.** The parent of any minor student or the student, if an adult, shall secure the immunizations required under s. 252.04, Stats., from available health care sources such as physicians' offices, hospitals or local health departments, or shall submit the waiver form.

*History:* Cr. Register, June, 1981, No. 306, eff. 7-1-81; correction made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; am. Register, June, 1997, No. 498, eff. 7-1-97.

**HFS 144.07 Responsibilities of schools and day care centers.** (1) The responsibilities of schools under these rules shall be those of the local school board and the school administrator. The licensee for each day care center shall be responsible for compliance with these rules. The school or day care center shall assure compliance with s. 252.04 (2), Stats.

(1m) By the 15th school day after a child or adult is admitted to a school or day care center and again by the 25th school day after a child or adult is admitted to a school or day care center, the school or day care center shall notify the adult student or the parent of any minor student who has not submitted either written evidence of immunization or a waiver form. Notification shall include instructions for complying with the requirements of s. 252.04 (2), Stats., including a list of missing immunizations, the availability of waivers for reasons of health, religion or personal conviction, and an explanation of the penalty for noncompliance.

(2) For any student who has received the first dose of each immunization required for that student's age or grade under s. HFS 144.03, but who has not received all of the required doses, the school shall obtain written evidence that the student has received the required subsequent doses of immunization as they

are administered, but no later than the deadlines described in s. HFS 144.03.

(3) If any minor student for whom a waiver form is not filed fails to comply with the immunization requirements described in s. HFS 144.03 by the date of admission to the school or day care center, the school or day care center shall, within 60 school days of that failure to comply, notify the district attorney in writing, with the notice to include the student's name and the name and address of the student's parent, and request the district attorney to seek a court order under s. 48.13 (13), Stats. The school or day care center shall keep the district attorney apprised of the subsequent compliance of a student initially reported to the district attorney.

(4) (a) The school shall report to the local health department and the day care center shall report to both the local health department and the department:

1. The degree of compliance with s. 252.04, Stats., and this chapter by students in that school or day care center.

2. The name and immunization history of any incompletely immunized student, including those students with waivers and those students in the process of being immunized.

(b) These reports shall be in a format prescribed by the department and shall be made by schools within 40 school days after the beginning of the term and by day care centers at intervals prescribed by the department. Updated reports shall be filed by the school on students who are in the process of being immunized. These updated reports shall be filed within 10 school days after the deadlines listed in s. HFS 144.03.

(5) The school and the day care center shall maintain on file the immunization history for each student and any waiver form submitted. Immunization histories shall be updated with information supplied by the local health department, parents or private physicians.

(6) The school or day care center shall maintain a current roster listing the name and immunization history of each student who does not meet all immunization requirements for that student's grade or age.

(7) The immunization record of any new student who transfers from one school or day care center to another shall be forwarded to the new school or day care center within 10 school days of the request for record transfer. The records of a day care student shall be transferred to a school if requested by either the admitting school or the parent.

(8) All suspected cases of diseases covered by s. 252.04 (2), Stats., or this chapter which occur among students or staff shall be reported immediately by telephone to the local health department.

(9) If one of the diseases covered by s. 252.04 (2), Stats., or this chapter occurs in a student or staff member, the school or day care center shall assist the local health department and the department in immediately identifying any unimmunized students, notifying their parents of the possible exposure and facilitating the disease control activities.

(10) If a substantial outbreak as defined in s. HFS 144.02 (12) occurs in a school or day care center, or in the municipality in which a school or day care center is located, the school or day care center shall exclude students who have not received all required immunizations against the disease, including students in all grades who have not had 2 doses of measles vaccine when it is an outbreak of measles that is occurring, when ordered to do so by the department. The exclusion shall last until the student is immunized or until the department determines that the outbreak has subsided.

*History:* Cr. Register, June, 1981, No. 306, eff. 7-1-81; am. (10), Register, July, 1990, No. 415, eff. 8-1-90; corrections made under s. 13.93 (2m) (b) 7., Stats., Register, August, 1995, No. 476; renum. (intro.) and (1) to be (1) and (2m) and am. (2m), am. (3), (4) (intro.), (a), (5) and (7) to (9), Register, June, 1997, No. 498, eff. 7-1-97.

**HFS 144.08 Responsibilities of local health departments.** (1) Each local health department shall make available

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the immunizations required under s. 252.04 (2), Stats., insofar as the vaccine is available without charge from the department under ch. HFS 146. Vaccines made available free from the department under ch. HFS 146 shall be administered without charge for the cost of the biologic. By mutual agreement, responsibility for making the needed immunizations available may be transferred from the local health department to a school or day care center.

(2) By November 15 of each year, each local health department shall report to the department statistical information concerning the degree of compliance with s. 252.04, Stats., of students within its service area. These reports shall be on a form prescribed by the department.

(3) The local health department shall assist the department in informing schools and day care centers of the provisions of s. 252.04, Stats., and this chapter.

History: Cr. Register, June, 1981, No. 306, eff. 7-1-81; corrections made under s. 13.93 (2m) (b) 7, Stats., Register, August, 1995, No. 476; am. Register, June, 1997, No. 498, eff. 7-1-97.

#### HFS 144.09 Responsibilities of the department.

(1) (a) The department, in cooperation with local boards of health and health officers, local school boards and school and day

care center administrators and other agencies, as appropriate, shall provide guidance to parents, physicians, schools and day care centers and local health departments in understanding the minimum immunization requirements under s. 252.04, Stats., and this chapter, the reasons behind their establishment and the process for implementing them.

(b) The department shall undertake a public education campaign to inform parents of students about requirements and rights under s. 252.04, Stats., and this chapter.

(c) The department shall prepare the reporting and waiver forms required under this chapter, and shall make copies of those forms available without charge.

Note: For copies of required reporting and waiver forms, write Immunization Program, Division of Health, P.O. Box 309, Madison, WI 53707-0309.

(2) The department shall maintain a surveillance system designed to detect occurrences of vaccine-preventable diseases listed in s. 252.04 (2), Stats., and this chapter and shall investigate outbreaks of these diseases to confirm the diagnosis, determine the source and probable pattern of spread of the infection and guide implementation of appropriate control measures.

History: Cr. Register, June, 1981, No. 306, eff. 7-1-81; corrections made under s. 13.93 (2m) (b) 7, Stats., Register, August, 1995, No. 476; r. and rect. Register, June, 1997, No. 498, eff. 7-1-97.

**AVISO LEGAL (Legal Notice)**  
**Inmunización Obligatoria (vacunación) para Admisión a Escuelas de Wisconsin**  
**(Required Immunizations (Shots) for Admission to Wisconsin Schools)**

Al Padre, Guardián o Custodio Legal de \_\_\_\_\_ Grado \_\_\_\_\_

La Ley de Inmunización de Estudiantes exige que todos los estudiantes hasta el grado 12 tengan un número mínimo de inmunizaciones obligatorias antes de ser aceptados a la escuela. Estos requisitos sólo pueden ser excusados debido a motivos de salud, religiosos, o de creencias personales. De acuerdo con nuestros expedientes, su hijo no cumple con la ley porque la escuela no dispone de un expediente de vacunaciones o bien porque se necesita una (o más) vacuna(s) (consulte abajo el motivo por el cual su hijo no cumple con la ley). Para cumplir con la ley, por favor indique en el Registro de Vacunación del Estudiante adjunto el mes, día y año en que su hijo recibió la vacuna requerida, o bien seleccione alguna de las opciones de exención antes de \_\_\_\_\_ y devuelva el formulario a la escuela. El incumplimiento puede resultar en una multa de hasta \$25 diarios o la posible exclusión de la escuela. Si quiere hacer alguna pregunta sobre este aviso, comuníquese con la escuela de su hijo/a.

En años previos, miles de niños de Wisconsin contrajeron sarampión, tos ferina, y rubéola, y como consecuencia muchos de ellos resultaron con discapacidades graves. La Ley de Inmunización de Estudiantes fue aprobada para prevenir que estas enfermedades, así como otras que pueden prevenirse mediante la vacunación, regresen y afecten la salud de nuestros hijos.

**Razón por la cual no cumple con la ley:**

☐ No hay expediente

Su hijo necesita las vacunas que han sido marcadas:

<u>DTP/DTaP/DT/Td</u>	<u>Polio</u>	<u>MMR</u>	<u>Hepatitis B</u>	<u>Varicela</u>
<input type="checkbox"/> 1 <sup>ra</sup> dosis	<input type="checkbox"/> 1 <sup>ra</sup> dosis	<input type="checkbox"/> 1 <sup>ra</sup> dosis	<input type="checkbox"/> 1 <sup>ra</sup> dosis	<input type="checkbox"/> 1 <sup>ra</sup> dosis < 13 años
<input type="checkbox"/> 2 <sup>da</sup> dosis	<input type="checkbox"/> 2 <sup>da</sup> dosis	<input type="checkbox"/> 2 <sup>da</sup> dosis	<input type="checkbox"/> 2 <sup>da</sup> dosis	<input type="checkbox"/> 2 <sup>da</sup> dosis 13+ años*
<input type="checkbox"/> 3 <sup>ra</sup> dosis	<input type="checkbox"/> 3 <sup>ra</sup> dosis		<input type="checkbox"/> 3 <sup>ra</sup> dosis	
<input type="checkbox"/> 4 <sup>ta</sup> dosis	<input type="checkbox"/> 4 <sup>ta</sup> dosis			
<input type="checkbox"/> 5 <sup>ta</sup> dosis				

\* Si su niño ya tenía varicela, la vacuna de la varicela no se requiere. Marque "sí" a la pregunta que trata de varicela en el Registro de Vacunación del Estudiante adjunto y escriba la fecha de la enfermedad si la sabe. La segunda dosis de la vacuna de la varicela se requiere solamente si la primera dosis fue dada cuando el niño tenía 13 o más años de edad.

Agradeceremos su cooperación inmediata.

\_\_\_\_\_  
Escuela

\_\_\_\_\_  
Teléfono

\_\_\_\_\_  
Funcionario Escolar (Título)

\_\_\_\_\_  
Fecha enviada

Adjunto: Registro de Vacunación del Estudiante

DPH4001S LegalNoticesSchools7-06.doc

## **EJEMPLO**

### **Aviso de Exclusión**

**Estimado Padre de Familia:**

**El Aviso Legal anexo le informa que su hijo no cumple actualmente con la Ley de Inmunización de Estudiantes y que por lo tanto será excluido de esta escuela a partir de \_\_\_\_\_ (fecha). Para que su hijo pueda regresar a la escuela, usted debe escoger alguna de las siguientes dos opciones:**

- 1) Informar a la escuela de la fecha (mes, día y año) en la(s) cual(es) la(s) vacuna(s) requerida(s) fue(ron) administrada(s), ya sea de sus propios registros o bien de un expediente de vacunación actualizado proveniente de su médico, clínica, o departamento de salud. Para la varicela (*chickenpox*) también es aceptable una indicación de que su hijo ha tenido la enfermedad.**
- 2) Solicitar una exención.**

**Use el Registro de Vacunación del Estudiante anexo para informarnos de la(s) fecha(s) de la(s) vacuna(s), solicitar una exención, o para indicar que su hijo ha tenido varicela.**

**La Ley de Inmunización de Wisconsin fue aprobada para proteger a todos los niños de enfermedades que pueden prevenirse mediante vacunas. La Ley exige a las escuelas públicas de primaria en distritos escolares cuyo nivel de cumplimiento sea inferior al 99 por ciento que expulse a los estudiantes que no cumplan con la ley, desde kindergarten hasta el quinto grado. Un estudiante que no cumple con la ley es uno que está “atrasado” en su programa de vacunas requeridas o para quien no se dispone de un expediente de vacunación en la escuela.**

**Agradecemos su cooperación.**

# REGISTRO DE VACUNAS DEL ESTUDIANTE

**INSTRUCCIONES A LOS PADRES:** COMPLETE Y DEVUELVA A LA ESCUELA 30 DÍAS DESPUÉS DEL INGRESO. La ley estatal requiere que todos los estudiantes de escuelas públicas y privadas presenten evidencia escrita de las vacunas contra algunas enfermedades, dentro de 30 días de ingresar a la escuela. Los requisitos específicos de edad / grado se piden en las escuelas y departamento de salud locales. Se puede renunciar a estos requisitos completando y firmando un formulario de renuncia en la escuela por motivos de salud, religión o personales (vea "RENUNCIAS" al reverso). Este formulario es para controlar el cumplimiento con la ley y se usará sólo para ese propósito. Si quiere hacer alguna pregunta, comuníquese con la escuela o departamento de salud local.

## DATOS PERSONALES

## ESCRIBA EN LETRA DE MOLDE

Paso 1	Nombre del estudiante	Fecha Nacimiento	Sexo	Escuela	Grado	Año escolar
	Nombre del padre/ Guardián / Custodio Legal	Dirección:			Número de Teléfono ( )	

## HISTORIA DE VACUNAS

Paso 2	Anoté el MES, DÍA Y AÑO en que su hijo(a) recibió las siguientes vacunas. NO MARQUE (V) o (X) excepto para responder la pregunta sobre varicela. Si usted no tiene registro de vacunas en su casa para este estudiante, comuníquese con el médico o departamento de salud para conseguir uno.					
	TIPO DE VACUNA*	1a. DOSIS Mes día año	2a. DOSIS Mes día año	3a. DOSIS Mes día año	4a. DOSIS Mes día año	5a. DOSIS Mes día año
	DTaP/DTP/DT/Td/Tdap (Difteria, Tétano, Pertusis)					
	Polio					
	Hepatitis B	3 dosis formulación pediátrica				
		2 dosis formulación adolescent				
	MMR (Sarampión, paperas, rubéola)					
	Vacuna contra la Varicela (viruelas locas) Esta vacuna se necesita solamente si su hijo(a) no ha tenido la varicela. Vea más abajo:					
	¿Ha tenido su hijo(a) la varicela? Marque el cuadro que corresponde y anote el año si lo sabe.					
	<input type="checkbox"/> SI _____ año (no necesita la vacuna) <input type="checkbox"/> NO o no está segura(o) (necesita vacuna)					

\*Vacuna Hib requerida sólo a niños en guarderías certificadas  
No anote aquí las fechas en que su hijo(a) recibió la vacuna Hib.

## REQUISITOS

Paso 3	Para determinar si este estudiante cumple con los requisitos, consulte el nivel de requisitos de acuerdo a edad/ grado.
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## CUMPLIMIENTO

Paso 4	<p><b>EL ESTUDIANTE CUMPLE CON TODOS LOS REQUISITOS</b> Firme en el Paso 5 y devuelva este formulario a la escuela _____ o _____</p> <p><b>EL ESTUDIANTE NO CUMPLE CON TODOS LOS REQUISITOS</b> Marque el cuadro que corresponda, firme en el Paso 5 y devuelva el formulario a la escuela. TOME NOTA QUE SI EL ESTUDIANTE NO TIENE TODAS SUS VACUNAS PUEDE SER EXCLUIDO DE LA ESCUELA SI APARECE UN BROTE DE ESTAS ENFERMEDADES.</p> <p><input type="checkbox"/> Aunque mi hijo(a) NO ha recibido todas las dosis de las vacunas, ha recibido LA PRIMERA DOSIS. Entiendo que la SEGUNDA DOSIS debe recibirla este año antes de cumplir 90 días de entrar a la escuela y la TERCERA Y CUARTA DOSIS si las requiere debe recibirlas antes de 30 días de este año escolar. También entiendo que es mi responsabilidad notificar por escrito a la escuela cada vez que mi hijo(a) recibe una dosis de las vacunas requeridas.</p> <p><b>NOTA:</b> Incumplimiento con el programa o falta de notificar a la escuela puede resultar en acción legal o multa de hasta \$25 por día de incumplimiento.</p> <p><b>RENUNCIAS</b> (Anoté en el Paso 2 las vacunas que ya haya recibido)  <input type="checkbox"/> Por razones de salud este estudiante no puede recibir las siguientes vacunas: _____</p> <p>_____ FIRMA del médico _____ Fecha firma</p> <p><input type="checkbox"/> Por razones religiosas este estudiante no puede ser vacunado.</p> <p><input type="checkbox"/> Por razones de creencias personales este estudiante no puede ser vacunado.</p>
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## FIRMA

Paso 5	<p>Este formulario está completo en forma fidedigna según como yo lo entiendo.</p> <p>_____ FIRMA - Padre(madre)/ Guardián / Custodio Legal o Estudiante Adulto _____ Fecha firma</p>
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**LEY DE VACUNAS DEL ESTUDIANTE (Student Immunization Law)**  
**REQUISITOS SEGÚN EDAD/ GRADO (Age/Grade Requirements)**  
**AÑO ESCOLAR 2006-2007 (2006-2007 School Year)**

Las siguientes son las vacunas mínimas que se requieren para cada nivel de edad/ grado. Este no es un programa de vacunas recomendadas para bebés y niños de edad preescolar. Para ese programa, consulte a su médico o al departamento de salud local.

Edad/ Grado	Número de Dosis				
Pre Kinder (2 a 4 años)	4 DTP/DTaP/DT	3 Polio	1 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5</sup>
Grados K <sup>2</sup> a 12	4 DTP/DTaP/DT/Td <sup>3</sup>	4 Polio <sup>4</sup>	2 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5,6</sup>

1. MMR Vacuna para todos los estudiantes. La primera dosis de la vacuna MMR debe recibirse al cumplir un año de edad. (Nota: Es aceptable una dosis 4 días o antes de cumplir un año).
2. DTP/DTaP/DT vacuna para los niños que entran a kindergarten: Su hijo(a) debe haber recibido una dosis al cumplir 4 años. (ya sea 3er., 4o. o 5o. grado) para ser aceptado. (Nota: Es aceptable una dosis 4 días o antes de cumplir 4 años).
3. DTP/DTaP/DT/Td vacuna para estudiantes que entran a grados 1 al 12: Se requieren 4 dosis. Pero, si su hijo(a) recibió la 3era. dosis después de cumplir 4 años, no necesita dosis adicionales. (Nota: Es aceptable una dosis 4 días o antes de cumplir 4 años). Una dosis de la vacuna de Tdap no se requiere pero es aceptable para cumplir este requisito.
4. La vacuna de polio para estudiantes que entran a grados kindergarten a 12: Se requieren 4 dosis. Pero, si su hijo(a) recibió la 3era. dosis después de cumplir 4 años, no necesita dosis adicionales. (Nota: Es aceptable una dosis 4 días o antes de cumplir 4 años).
5. Var se refiere a la vacuna de varicela (viruelas locas). También se acepta si ha tenido la varicela.
6. Los estudiantes de 13 años or mayores que no tienen historia de enfermedad de varicela o vacuna contra varicela necesitan dos dosis de la vacuna contra la varicela.

**LEY DE VACUNAS DEL ESTUDIANTE (Student Immunization Law)**  
**REQUISITOS SEGÚN EDAD/ GRADO (Age/Grade Requirements)**  
**AÑO ESCOLAR 2007-2008 (2007-2008 School Year)**

Las siguientes son las vacunas mínimas que se requieren para cada nivel de edad/ grado. Este no es un programa de vacunas recomendadas para bebés y niños de edad preescolar. Para ese programa, consulte a su médico o al departamento de salud local.

Edad/ Grado	Número de Dosis				
Pre Kinder (2 a 4 años)	4 DTP/DTaP/DT	3 Polio	1 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5</sup>
Grados K <sup>2</sup> a 12	4 DTP/DTaP/DT/Td <sup>3</sup>	4 Polio <sup>4</sup>	2 MMR <sup>1</sup>	3 Hep B	1 Var <sup>5,6</sup>

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5. Var se refiere a la vacuna de varicela (viruelas locas). También se acepta si ha tenido la varicela.
6. Los estudiantes de 13 años or mayores que no tienen historia de enfermedad de varicela o vacuna contra varicela necesitan dos dosis de la vacuna contra la varicela.



